#### PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

5 Applicants: Min-Jer Lin

App. No.: 10/710,399 Filing Date: 07/08/2004

Examiner: DAO H, NGUYEN Art Unit: 2818

Docket No.: LKSP0027USA

10 Title: SEMICONDUCTOR PACKAGE AND METHOD FOR

MANUFACTURING THE SAME

To: Mail Stop 16

Commissioner for Patents

15 P.O. Box 1450

Alexandria VA 22313-1450

Subject: Request for a refund of incorrect deduction for claims in excess of twenty pursuant to 37 CFR

20 1.26

Dear Sir,

The applicant filed a response to the Office action mailed on 12/14/2006 of the above-identified application on 03/14/2007. There is no excess claim fee that needed to be deducted.

But the fee \$150 for excess claims fee was charged from the deposit account 50-3105 on 03/15/2007.

30 03/15 2 10710399 LKSP0027USA 1202 \$150.00

Document code: WFEE

United States Patent and Trademark Office Sales Receipt for Accounting Date: 03/15/2007

DJACOBS SALE #00000002 Mailroom Dt: 03/13/2007 503105 10710399

01 FC: 1202

150.00 DA

The Fee Worksheet dated 03/16/2007 on IFW shows that total claims are 23 and highest number previously paid for is 20 (Attachment 1). However, the Fee Worksheet dated 07/08/2004 on IFW shows that total claims are 25 (Attachment 2). So the excess claims fee should not be charged.

Please refund the fee \$150 to the deposit account 50-3105 pursuant to 37 CFR 1.26. Your quick response is greatly appreciated.

Sincerely yours,

5

15 Wunton Hars

Date:

04/16/2007

Winston Hsu, Patent Agent No. 41,526

P.O. BOX 506, Merrifield, VA 22116, U.S.A.

Voice Mail: 302-729-1562

Facsimile: 806-498-6673

20 e-mail: winstonhsu@naipo.com

Note: Please leave a message in my voice mail if you need to talk to me. (The time in D.C. is 12 hours behind the Taiwan time, i.e. 9 AM in D.C. = 9 PM in Taiwan.)

# Attachment 1

PTO/SB/06 (12-04) Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Dock					Docks	cation or set Number 710399 Filing Date: 07/08/2004		To be Mailed			
	APF	PLICATION /	AS FILED	-PARTI				1		OTH	ER THAN
		)	(Colum	n 1)	(Column 2)		SMALL	ENTITY .	OR	ŞMAL	LENTITY
	FOR		NUMBER	FILED	NUMBER EXT	RA	RATE (S)	FEE (\$)		RATE (5)	FEE (\$)
BASIC FEE (37 CFR 1.16(8), (b), or (c))		r (e))	N/A		N/A		N/A	The state of the s		N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))		r (m))	N/A	N/A			NA			N/A	
EXAMINATION FEE (37 CFR 1.18(0), (p), or (q))			N/A		NA		N/A			N/A	
_	L CLAIMS R 1.16(i))			minus 20 = •			X 125 =		OR	X \$50 =	
	PENDENT CLAIM! R 1.16(h))	5		minus 3 = •			X \$100=			x \$200=	
DAPPLICATION SIZE FEE (37 CFR 1.18(1))			100 sheets of paper, the application si fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).		on						
	OULTIPLE DEPEN	DENT CLAIM P	RESENT (3	7 CFR 1.16(I))			+\$180			+\$360	
i th	difference in colu	mn 1 is less tha	n zero, ente	r "0" in column :	2.		TOTAL			TOTAL	
AMENDMENT A	100306 Total profit	REMAINING AFTER AMENDMENT • 12		PREVIOUSLY PAID FOR - 20	PRESE EXTR		RATE (\$) X \$25 =	ADDITIONAL FEE (\$)	OR	RATE (\$) x \$50=	ADDITION/ FEE (5)
ב ב	Independent (37 CFR 1.18(N))	• 1	Minus	<b>~</b> 3	= 0		X \$100=		OR	X \$200=	0
בו ב	Application Size Fee (37 CFR 1.16(s))					-					
₹		ENTATION OF MU		NDENT CLAIM (S	7 CFR 1.16(I))				OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column	n 3)				·	
AMENDMENT B	3/13/04	CLAIMS REMAINING AFTER AMENDMENT	1	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESE EXTR		RATE (5)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITION/ FEE (\$)
	Total of CFR	.23	Minus	- 20	3		X \$25 =		OR	X \$50 =	150.0
	independent (37 CFR 1,18(9))	•	Minus	- (3	8		X \$100 =		OR	X \$200 =	
N S		Size Fee (37 CF	R 1.16(s))								
<b>4</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))							OR			
CALCULATE					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	150-0		
	e entry in column								•	Examine	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

## Attachment 2

## **FEE TRANSMITTAL**

Electronic Version v08

Stylesheet Version v08.0

Title of Invention

SEMICONDUCTOR PACKAGE AND METHOD FOR MANUFACTURING THE SAME

Application Number:

Date:

First Named Applicant:

Min-Jer Lin

Attorney Docket Number:

LKSP0027USA

## **TOTAL FEE AUTHORIZED \$ 900**

Patent fees are subject to annual revisions on or about October 1st of each year.

Filing as large entity

## **BASIC FILING FEE**

Fee Description	Fee Code	Amount \$	Fee Paid \$	
Utility Filing Fee	1001	770	770	
		Subtotal For	Basic Filing Fees: \$ 770	

## **EXTRA CLAIM FEES**

Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$
Total Claims: 25	5	1202	18	90
Independent Claims : 2	0	1201	86	0
		and the latest than	Subtotal For Extra	Claims Fees: \$ 90

## **ASSIGNMENT FEES**

Fee Description	Property Number	Quantity	Fee Code	Amount \$	Fee Paid \$		
Recording Each Patent Assignment Per Property Fee	0000000	1	8021	40	40		
Subtotal For Additional Fees: \$							

## **AUTHORIZED BILLING INFORMATION**

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit account number:

503105

**Access Code** 

\*\*\*\*

Deposit name:

North America Intellectual Property Corporation

Deposit authorized name:

**WINSTON HSU** 

Signature:

VAEB-JMXX-8IIL